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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/613,113	07/10/2000	Dirk Husemann	CH9-1999-0017-US1(728-167)	8808
66668	7590	12/04/2008	EXAMINER	
THE FARRELL LAW FIRM - IBM 333 EARLE OVINGTON BOULEVARD SUITE 701 UNIONDALE, NY 11553			HUYNH, BA	
		ART UNIT	PAPER NUMBER	
		2179		
		MAIL DATE		DELIVERY MODE
		12/04/2008		PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.



UNITED STATES PATENT AND TRADEMARK OFFICE

Board of Patent Appeals and Interferences

THE FARRELL LAW FIRM - IBM
333 EARLE OVINGTON BOULEVARD
SUITE 701
UNIONDALE, NY 11553

Appeal No: 2008-2728
Appellant: Dirk Husemann et al.
Application No: 09/613,113
Hearing Room: B
Hearing Docket: B
Hearing Date: Thursday, January 22, 2009
Hearing Time: 09:00 AM
Location: Madison Building - East Wing
600 Dulany Street, 9th Floor
Alexandria, Virginia 22313-1450

NOTICE OF HEARING
CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE: **HEARING ATTENDANCE CONFIRMED** **HEARING ATTENDANCE WAIVED**

Signature of Attorney/Agent/Appellant

Date

Registration No.

Names of other visitors expected to accompany counsel: _____
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